## PART B - FEE(S) TRANSMITTAL

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22971 7.	590 04/06/2006			have its own certific	cate of mailing or transmission		
MICROSOFT C ATTN: PATENT ONE MICROSOF	ORPORATION GROUP DOCKETING T WAY	DEPARTMEN	Т	I hereby certify tha States Postal Servic addressed to the M transmitted to the U	Certificate of Mailing or Transmission  fy that this Fee(s) Transmittal is being deposited with the United  Service with sufficient postage for first class mail in an envelope the Mail Stop ISSUE FEE address above, or being facsimile the USPTO (571) 273-2885, on the date indicated below.		
REDMOND, WA	98052-6399			No	emi Tovar	(Depositor's name)	
					Dimi Franz	(Signature)	
				-	4.19.2006	(Date)	
APPLICATION NO.	FILING DATE	FIRST NAMEE		ENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/902,469	09/902,469 07/10/2001			0	160315.01	6779	
DYNAMIC WEB PAGE C	ONTENT FILE	LIS FOR PROVI	DING SERVER	-Side Code Gene	ERATION FROM A USER	DEFINED	
APPLN. TYPE	SMALL ENTITY	ISSUE FE	E	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400		\$300	\$1700	07/06/2006	
EXAN	ART UNI	IT CLASS-SUBCLASS					
STEELMAN, MARY J				717-108000			
<ul> <li>I. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> <li>"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02, or more recent) attached. Use of a Customer Number is required.</li> </ul>			2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME AND	RESIDENCE DATA TO BI	PRINTED ON TH	IE PATENT (prin	t or type)			
PLEASE NOTE: Unless recordation as set forth in	s an assignce is identified be n 37 CFR 3.11. Completion of	ow, no assignee di f this form is NOT	ita will appear or a substitute for fil	the patent. If an assi	gnee is identified below, the	document has been filed for	
(A) NAME OF ASSIGN				(CITY and STATE OF			
Microsoft	CorporATIO	5N	Res	MOND,	WX-		
Please check the appropriate	e assignee category or categor	ies (will not be prin	ted on the patent)	: 🔾 Individual 💆	Corporation or other private g	roup entity Government	
a. The following fee(s) are	enclosed:		b. Payment of Fec(s):				
Issue Fee	0 7 8		A check in the amount of the fec(s) is enclosed.				
Advance Order # or	small entity discount permitted f Copies	l)	Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).				
Takance Oracs o.	r Copies	· · · · · · · · · · · · · · · · · · ·	Deposit Accour	t Number	(enclose an ext	adit any overpayment, to ra copy of this form).	
a. Applicant claims S	(from status indicated above) MALL ENTITY status, See 3	7 CFR 1.27.	b. Applicant is	no longer claiming SM	ALL ENTITY status, See 37 (	FR. 1.27(g)(2).	
The Director of the USPTO NOTE: The Issue Fee and P nicrest as shown by the reco	is requested to apply the lesue abbeation Fee (if required) w ords of the United States Pater	Fee and Publication Ill not be accepted for and Trademark O	n Fee (if any) or t rom anyone other ifice.	o re-apply any previot than the applicant; a re	isly paid issue fee to the applic egistered attorney or agent; or t	ation identified above. he assignee or other party in	
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